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APPLICANT

SIGNATURE OF PERSON FINGERPRINTED

Francis S. Powers
RESIDENCE OF PERSON FINGERPRINTED

SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

TYPE OR PRINT ALL REQUESTED DATA

Powers
LAST NAME

Francis
FIRST NAME

G
MIDDLE NAME

RACE

CONTRIBUTOR AND ADDRESS

COMPANY AND ADDRESS

NO. OF

DIR. OF SECURITY
CENTRAL INTELL. AGENCY
2430 E STREET N.W.
WASH. D.C.

NUMBER

LEAVE THIS SPACE BLANK

DATE FINGERPRINTED

28 Apr 56

PLACE OF BIRTH

Lexington, Ky
CITIZENSHIP

CLASS

REF.

U.S.

SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS

1. RIGHT THUMB

2. RIGHT INDEX

3. RIGHT MIDDLE

4. RIGHT RING

5. RIGHT P.

6. LEFT THUMB

7. LEFT INDEX

8. LEFT MIDDLE

9. LEFT RING

10. LEFT P.

LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY

LEFT THUMB

RIGHT THUMB

RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY